

216021773
100499

State of Nebraska
Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2	Total Number of Vehicles	Local No./ District 084	Agency Case No. B6-047272	HIT & RUN? <input type="radio"/> YES <input checked="" type="radio"/> NO	INVESTIGATION MADE AT SCENE? <input checked="" type="radio"/> YES <input type="radio"/> NO	L 1
A/1	DATE OF ACCIDENT	M M / D D / Y Y Y Y S M T W T H F S 05/29/2016		(In Military Time) TIME OF ACCIDENT 1530	STATE USE ONLY	
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1531	05/29/2016	
B	86	ROAD ON WHICH ACCIDENT OCCURRED STREET/ HIGHWAY NO. S 16TH ST			PRIVATE PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	LATITUDE
C	1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	ONE-WAY STREET? <input checked="" type="radio"/> YES <input type="radio"/> NO	LONGITUDE
D	1	IF AT INTERSECTION		IF NOT AT INTERSECTION		
V1/M	03	NAME OF INTERSECTING ROADWAY K ST				
V2/M	01	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN				
E	1	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="radio"/> YES <input checked="" type="radio"/> NO	
F	1	DRIVER LICENSE NO. H12715649			STATE (Of License) NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/N	2	DRIVER JOHN A MORAN			PHONE 402-239-4368	LOCAL NO.
V2/N	2	DRIVER ADDRESS 5201 N 9TH CIR, LINCOLN, NE 68521			CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY) 09/27/1984
G	6	OWNER ROBERT J MORAN / JOHN A MORAN			PHONE	LOCAL NO.
H	5	OWNER ADDRESS 1900 WILDWOOD CIR, BEATRICE, NE 68310			CITY, STATE, ZIP	CITATION <input checked="" type="radio"/> YES <input type="radio"/> NO LB506698
V1/O	2	LICENSE PLATE PA NO. 3B4875	YEAR 2014	MAKE Jeep	MODEL Cherokee	BODY STYLE Medium/large
V2/O	3	VEHICLE ID NO. (VIN) 1C4PJLCS0EW182717	VEHICLE 2014	MAKE Jeep	MODEL Cherokee	BODY STYLE Medium/large
I	1	DRIVER LICENSE NO. H13637713			STATE (Of License) NE	SEX <input type="radio"/> FEMALE <input checked="" type="radio"/> MALE
V1/P	1	DRIVER HTEE L KU			PHONE 402-840-2738	LOCAL NO.
V2/P	1	DRIVER ADDRESS 1020 WASHINGTON ST APT 4, LINCOLN, NE 68502			CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY) 09/26/1993
J	01	OWNER LWEL D MOO			PHONE 402-840-2738	LOCAL NO.
V1/Q	4	LICENSE PLATE PA NO. UAD052	YEAR 2005	MAKE Honda	MODEL Accord	BODY STYLE 2 door Sedan
V2/Q	1	VEHICLE ID NO. (VIN) 1HGCM82685A010960	VEHICLE 2005	MAKE Honda	MODEL Accord	BODY STYLE 2 door Sedan
K	02	TOWED TO 101 Charleston St			TOWED BY Captial Towing	POLICY NO. 1145032-D28-27
Complete this section for all injured persons (Complete a continuation report, if more than three were injured)				DATE OF BIRTH (MM / DD / YYYY)	1 2 3 4 5	SEX M F
VEH. #	2	NAME RU DYE 1020 WASHINGTON ST #4, LINCOLN, NE 68502	ADDRESS	06/01/1995	1 03	2 1
VEH. #	2	NAME PAI PAT 1010 C ST #5, LINCOLN, NE 68502	ADDRESS	01/01/1976	1 09	2 10
VEH. #		NAME	ADDRESS		1	2
VEH. #		NAME	ADDRESS		1	2

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B6-047272

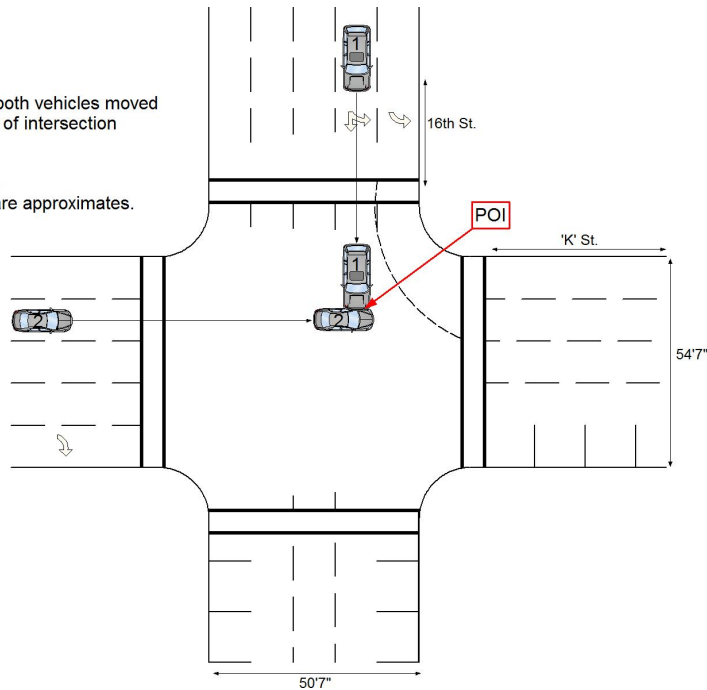


Indicate
North
by Arrow



POI: Not obtained, both vehicles moved to N curb of K ST E of intersection prior to Ofcs arrival

Sketch not to scale.
All measurements are approximates.



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

D1 stated that he was driving SB on S 16TH ST in the 2nd most East lane when he violated a red light at K ST and collided with V2. D1 stated that he was travelling approximately 20 mph at the time of impact. D2 stated that he was EB on K ST in the 2nd most North lane and entered the intersection at S 16TH ST on a green light when V1 collided with the driver side of his vehicle. D1 stated that both vehicles pulled over to the North curb of K ST East of the intersection prior to Ofcs arrival to avoid blocking traffic. D1 was cited and released for violating a traffic signal.

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE \$
WITNESSES	NAME	ADDRESS			PHONE
	NAME	ADDRESS			PHONE

VEHICLE MOVEMENT BEFORE COLLISION				POINT OF IMPACT AND MOST DAMAGED AREA (Enter numbers for each vehicle)				AIRBAG DEPLOYED VEHICLE 1		RESTRAINT USE VEHICLE 1		TOTAL OCCUPANTS						
VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME	VEHICLE 1		VEHICLE 2		VEHICLE 1		VEHICLE 1		VEH 1	2	VEH 2	3	
1		X			S 16TH ST	POINT OF IMPACT	01	POINT OF IMPACT	07	1	2	3	4	Driver No. 1	Driver No. 2	Pedestrian		
2			X		K ST	MOST DAMAGED AREA	01	MOST DAMAGED AREA	07	1	2	3	4	Y	Y	Y		
1	01	06 Turning left				00 None	02	03	04	1	2	3	4	N	X	N	X	N
2	01	07 Making U-turn				09 Top & windows	01	02	03	04	2	3	4	BAC LEVEL				
		08 Entering traffic lane				10 Undercarriage	05	06	07	5	6	7	8	ALCOHOL/ DRUGS SUSPECTED				
		09 Leaving traffic lane				11 Total (all areas)	08	07	06	6	7	8	9	1 Driver No. 1				
		10 Parked				12 Other								2 Driver No. 2				
		11 Slowing or stopped in traffic												1				
		12 Other												1				
		13 Unknown												1				
OFFICER NO. 1755					TROOP/ TEAM/ BEAT SW	DEPARTMENT Lincoln Police Department					Photographs taken? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
INVESTIGATOR NAME (Print or Type) Seth Pinnow					INVESTIGATOR SIGNATURE Approved by Officer Seth Pinnow					DATE OF REPORT 05/29/2016								